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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MISSOURI		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Cas	e):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your	Joyce First name  L Middle name  Mennies Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)	
	meeting with the trustee.	Last Harrie and Julia (Jr., Jr., II, III)	Last Harne and Sunix (St., St., II, III)	
2.	All other names you have used in the last 8 years	Joyce Anderson		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5580		

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Debtor 1 Joyce L Mennies

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	5718 Henner	If Debtor 2 lives at a different address:
		Saint Louis, MO 63120  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saint Louis City County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Joyce L Mennies Pg 3 of 58 Case number (# known)

Part	Tell the Court About Y	our Ba	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see ago to the top of page 1 and c			C. § 342(b) for Individ	uals Filing for Bankruptcy
	choosing to file under	☐ Ch	napter 7					
		☐ Ch	napter 11					
		☐ Ch	napter 12					
		■ Cł	napter 13					
8.	How you will pay the fee		about how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself, y	ou may pay with cash	n, cashier's check, or money
			I need to pay	the fee in installments. If y		e this option, sign	and attach the Applica	ation for Individuals to Pay
			ū	e in Installments (Official For	,	de la cardia a carboli	(1) a a fa a Ob a	oten 7. Dealess of Salara areas
			but is not requapplies to you	t my fee be waived (You ma uired to, waive your fee, and ir family size and you are una in to Have the Chapter 7 Filin	may do so able to pa	o only if your incomy the fee in installn	ne is less than 150% onents). If you choose	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the	□ No	).					
	last 8 years?	■ Ye	s.					
			District	Eastern District of Missouri	When	12/31/14	Case number	14-50017
			District	Eastern District of Missouri	When	9/06/02	Case number	02-45553
			District		When		Case number	
10.	Are any bankruptcy	■ No	<u> </u>					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.					
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		_ When		Case number, if	known
11.	Do you rent your residence?	■ No	Go to li	ne 12.				
	i esiuelice :	☐ Ye	s. Has yo	ur landlord obtained an evicti	on judgm	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.	t About aı	n Eviction Judgmei	nt Against You (Form	101A) and file it as part of

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Debtor 1 Joyce L Mennies Pg 4 of 58

Case number (if known)

Part	Report About Any Bu	sinesses	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busine	ess
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State &	3 ZIP Code
	it to this petition.		Check	the appropriate box to	o describe your business:
				Health Care Busines	s (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Es	state (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defin	ned in 11 U.S.C. § 101(53A))
				Commodity Broker (a	as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-flo .C. 1116(	dicate that you are a sow statement, and fed 1)(B).	urt must know whether you are a small business debtor so that it can set appropriate mall business debtor, you must attach your most recent balance sheet, statement of eral income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	ı am n	ot filing under Chapter	11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 11,	but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	Report if You Own or	Have Any	Hazardo	us Property or Any P	Property That Needs Immediate Attention
	Do you own or have any		Tiazaido	us i roperty or Any i	Toperty That Needs Infinediate Attention
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	umber, Street, City, State & Zip Code

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Debtor 1 **Joyce L Mennies** 

Part 5:

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15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Pa 6 of 58 Debtor 1 **Joyce L Mennies** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joyce L Mennies Signature of Debtor 2 Joyce L Mennies Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

March 11, 2019 MM / DD / YYYY

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Debtor 1 Joyce L Mennies Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert	Faerber	Date	March 11, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Dahart Fa	aula au			
Robert Fa	erber			
Printed name				
Robert Fa	erber			
Firm name				
230 S. Ber	mistion			
Suite 600				
Saint Loui	is, MO 63105			
Number, Street,	City, State & ZIP Code			
Contact phone	(314)727-3434	Email address	faerber@msn.com	
46794 MO			·	·
Bar number & S	tate		<del></del>	

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Fill in this infor	mation to identify your	case:	rg 0 01 30	
Debtor 1	Joyce L Mennies			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	DF MISSOURI	
Case number				
(if known)				☐ Check if this is an
				amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	25,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,130.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	35,130.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	14,174.20
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	29,079.32
	Your total liabilities	\$	43,253.52
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,977.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,723.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Joyce L Mennies

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

255.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Entered 03/12/19 16:15:33 Main Document Case 19-41436 Doc 1 Filed 03/12/19 Fill in this information to identify your case and this filing: Debtor 1 Joyce L Mennies Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? 1.1 What is the property? Check all that apply 5718 Henner ☐ Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the **Saint Louis** MO 63120-0000 ■ Land entire property? portion you own? ☐ Investment property City \$25,000.00 \$25,000.00 State ZIP Code ☐ Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or

a life estate), if known. Who has an interest in the property? Check one Fee simple Debtor 1 only **Saint Louis City** ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.......>>

\$25,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 19-41436 Doc 1 Filed 03/12/19 Entered 03/12/19 16:15:33 Main Document Pg 11 of 58

3. <b>C</b>				Case number (if known)	
	ars, vans, trucks, tra	actors, sport utility ve	hicles, motorcycles		
	l No				
	Yes				
3.1	Make: Chever	olet	Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on <i>Schedule D</i> :
	Model: Cruze		Debtor 1 only		ve Claims Secured by Property.
	Year: <b>2014</b>		Debtor 2 only	Current value of t	
	Approximate mileage Other information:	116,792	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Stollen 1-2019		☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$8,000	.00 \$8,000.00
5 <b>4</b>			n for all of your entries from Part 2, including that number here		\$8,000.00
<b>Do</b> ;	you own or have any lousehold goods and		terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	⊒ No	ances, furniture, lineris	, Cillia, Richenware		
_					
ı	Yes. Describe				
	Yes. Describe	hypothetical liq in varying age, considering the property. The v Debtor's proper it has no re-sale The Debtor has to value proper liquidation. The	ds  f this property is based on an estimatio uidation estate sale (yard sale). The value wear and tear, and depreciation of the plength of time that the Debtor has own aluation assumes that a significant porty of this category is depreciate to the pevalue whatsoever. This is a layperson no professional or specialized knowled by or the likelihood of sale in the event of Debtor expressly reserves the right to or insurance purposes and replacement	lue factors broperty ed the tion of the boint where 's valuation. lige on how of assert a	\$1,500.00
7. <b>E</b>	:lectronics Examples: Televisions	The valuation of hypothetical liquin varying age, considering the property. The value of the property of the property of the property of the pettor has to value property of the property of t	If this property is based on an estimation uidation estate sale (yard sale). The value wear and tear, and depreciation of the plength of time that the Debtor has own aluation assumes that a significant porty of this category is depreciate to the pervalue whatsoever. This is a layperson no professional or specialized knowled by or the likelihood of sale in the event of the Debtor expressly reserves the right to the professional or specialized knowled to be professional or specialized knowled to the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized knowledge or the likelihood of sale in the event of the professional or specialized kno	lue factors broperty ed the tion of the boint where 's valuation. lge on how of assert a it.	
7. <b>E</b>	Electronics Examples: Televisions including co ☑ No	The valuation of hypothetical liquin varying age, considering the property. The value of the property of the property of the property of the pebtor has to value property of the property of t	If this property is based on an estimation uidation estate sale (yard sale). The value wear and tear, and depreciation of the pullength of time that the Debtor has own raluation assumes that a significant porty of this category is depreciate to the pervalue whatsoever. This is a layperson no professional or specialized knowled by or the likelihood of sale in the event of a Debtor expressly reserves the right to for insurance purposes and replacement elements.	lue factors broperty ed the tion of the boint where 's valuation. lge on how of assert a it.	\$1,500.00  collections; electronic devices

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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Case number (if known)

Pa Do	<ul> <li>Yes. Give specific information</li> <li>15. Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here</li></ul>	hen you file your petit	
Pa Do	15. Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here	hen you file your petit	Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa	<ul> <li>15. Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here</li></ul>		Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa	15. Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here		Current value of the portion you own? Do not deduct secured claims or exemptions.
Pa	Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here  Part 4: Describe Your Financial Assets	ou have attached	Current value of the portion you own? Do not deduct secured
Pa	Add the dollar value of all of your entries from Part 3, including any entries for pages your for Part 3. Write that number here  Part 4: Describe Your Financial Assets	ou have attached	\$1,930.00
15	15. Add the dollar value of all of your entries from Part 3, including any entries for pages yo	ou have attached	\$1,930.00
	☐ Yes. Give specific information		
14.	<ul> <li>14. Any other personal and household items you did not already list, including any health aid</li> <li>No</li> </ul>	ds you did not list	
	☐ Yes. Describe		
13.	Examples: Dogs, cats, birds, horses  No		
10	13. Non-farm animals		
	Costume Jewelry		\$30.00
	□ No ■ Yes. Describe		
12.	12. <b>Jewelry</b> Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry.	elry, watches, gems,	gold, silver
	Wearing Apparel		\$200.00
	Yes. Describe		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No		
11	☐ Yes. Describe  11. Clothes		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No		
10.	10. Firearms		
10.	☐ Yes. Describe		
10.	musical instruments  No		
	■ No	If clubs, skis; canoes	and kayaks: carpentry tools:

Official Form 106A/B Schedule A/B: Property page 3

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Deptor 1	Joyce L Mennies		Case number (if known)	
	s, mutual funds, or publicly traded stock			
_	nples: Bond funds, investment accounts with	n brokerage firms, money man	(et accounts	
■ No	Landbard and a star			
☐ Yes	Institution or iss	uer name:		
	oublicly traded stock and interests in inc venture	orporated and unincorporat	ed businesses, including an interest in	an LLC, partnership, and
■ No				
☐ Yes	Give specific information about them			
	Name of entity:		% of ownership:	
Nego Non-l	rnment and corporate bonds and other notiable instruments include personal checks, negotiable instruments are those you cannot	cashiers' checks, promissory	notes, and money orders.	
■ No				
☐ Yes	Give specific information about them			
	Issuer name:			
	ement or pension accounts nples: Interests in IRA, ERISA, Keogh, 401(	k), 403(b), thrift savings accou	nts, or other pension or profit-sharing pla	ns
■ Yes	s. List each account separately.			
	Type of account:	Institution name:		
		St. Louis City R	etirement Pension	Unknown
■ No □ Yes	nples: Agreements with landlords, prepaid research	Institution name or	individual:	, 5, 5, 5, 5, 5
	Issuer name and descriptio	n.		
	sts in an education IRA, in an account in S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program,	or under a qualified state tuition progra	am.
☐ Yes	Institution name and descri	ption. Separately file the recor	ds of any interests.11 U.S.C. § 521(c):	
25. Trusts	s, equitable or future interests in propert	y (other than anything listed	in line 1), and rights or powers exerci	sable for your benefit
☐ Yes	s. Give specific information about them			
-	nts, copyrights, trademarks, trade secrets		•	
■ No		·		
☐ Yes	s. Give specific information about them			
Exan	ses, franchises, and other general intangules: Building permits, exclusive licenses,		gs, liquor licenses, professional licenses	
■ No □ Yes	s. Give specific information about them			
	r property owed to you?			Current value of the
money of	. proporty office to you:			portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

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De	btor 1	Joyce L Mennies	Fy 14 01 36	Case number (if known)	
	Tax ref	funds owed to you			
		Give specific information about them, inc	cluding whether you already filed the returns	s and the tax years	
	Exam	support oles: Past due or lump sum alimony, spou	usal support, child support, maintenance, di	ivorce settlement, property	settlement
	■ No □ Yes.	Give specific information			
		amounts someone owes you bles: Unpaid wages, disability insurance p benefits; unpaid loans you made to	payments, disability benefits, sick pay, vaca someone else	ation pay, workers' compe	nsation, Social Security
		Give specific information			
-		ets in insurance policies oles: Health, disability, or life insurance; h	nealth savings account (HSA); credit, home	owner's, or renter's insurar	nce
l	☐ Yes.	Name the insurance company of each po Company name:	olicy and list its value. Benefi	ciary:	Surrender or refund value:
	If you	terest in property that is due you from are the beneficiary of a living trust, expectane has died.	someone who has died at proceeds from a life insurance policy, or a	are currently entitled to rec	eive property because
		Give specific information			
33.		against third parties, whether or not yoles: Accidents, employment disputes, ins	you have filed a lawsuit or made a demanders	nd for payment	
	■ No	Describe each claim			
				f the debter and rights to	a not off plaims
	■ No	contingent and uniiquidated claims of	every nature, including counterclaims o	r the debtor and rights to	set on claims
ı	☐ Yes.	Describe each claim			
35.	Any fir ■ No	nancial assets you did not already list			
I	☐ Yes.	Give specific information			
36.			om Part 4, including any entries for page	•	\$200.00
Par	rt 5: De	scribe Any Business-Related Property You	Own or Have an Interest In. List any real estat	e in Part 1.	
37.	Do you	own or have any legal or equitable interest	in any business-related property?		
	No. Go	to Part 6.			
	Yes. C	Go to line 38.			
Par		scribe Any Farm- and Commercial Fishing- ou own or have an interest in farmland, list it ir	Related Property You Own or Have an Interest	t In.	
46.	_ `	I own or have any legal or equitable in Go to Part 7.	nterest in any farm- or commercial fishing	g-related property?	
		. Go to line 47.			
Par	rt 7:	Describe All Property You Own or Have a	an Interest in That You Did Not List Above		

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Case number (if known)

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$25,000.00 56. Part 2: Total vehicles, line 5 \$8,000.00 Part 3: Total personal and household items, line 15 57. \$1,930.00 58. Part 4: Total financial assets, line 36 \$200.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$10,130.00 Copy personal property total \$10,130.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1

**Joyce L Mennies** 

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$35,130.00

#### Case 19-41436 Doc 1 Filed 03/12/19 Entered 03/12/19 16:15:33 Main Document

Fill in this infor	Fill in this information to identify your case:					
Debtor 1	Joyce L Mennies					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MISSOURI			
Case number _					☐ Check if this is an amended filing	

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	----------	-----------	-----------

	Misc. Electronics	\$200.00		\$200.00	RSMo § 513.430.1(1)
	based on an estimation of a hypothetical liquidation estate sale (yard sale). The value factors in varying age, wear and tear, and depreciation of the property considering the length of time that the Debt Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Household Goods The valuation of this property is	\$1,500.00		\$1,500.00	RSMo § 513.430.1(1)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2014 Cheverolet Cruze 116,792 miles Stollen 1-2019	\$8,000.00		\$3,000.00	RSMo § 513.430.1(5)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	5718 Henner Saint Louis, MO 63120 Saint Louis City County	\$25,000.00		\$15,000.00	RSMo § 513.475
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	☐ You are claiming federal exemptions. 11 to	U.S.C. § 522(b)(2)			
	■ You are claiming state and federal nonban	kruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)	
1.	Which set of exemptions are you claiming	? Check one only, ever	า if yo	ur spouse is filing with you.	
Fε	Identify the Property You Claim as E	xempt			

□ 100% of fair market value, up to any applicable statutory limit

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Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	ng Apparel om Schedule A/B: 11.1	\$200.00		\$200.00	RSMo § 513.430.1(1)
Line iic	om Schedule A/B. TT.T			100% of fair market value, up to any applicable statutory limit	
	ime Jewelry	\$30.00	•	\$30.00	RSMo § 513.430.1(2)
Zillo III	Sill Goreadie / V.E. 1211			100% of fair market value, up to any applicable statutory limit	
Check	king: First Community Credit	\$200.00		\$200.00	RSMo § 513.430.1(3)
	om Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

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		Pa 18 of 58			
Fill i	n this information to identify you	ır case:			
Debt	tor 1 Joyce I Mennic	ne.			
Debi	tor 1 Joyce L Mennie First Name	Middle Name Last Name		-	
Debt	tor 2				
	se if, filing) First Name	Middle Name Last Name		-	
Lloite	ad States Bankruptay Court for the	: EASTERN DISTRICT OF MISSOURI			
Unite	ed States Bankruptcy Court for the	EASTERN DISTRICT OF MISSOURI		-	
Case	e number				
(if kno				☐ Check	if this is an
				amend	led filing
<u>Offi</u>	<u>cial Form 106D</u>				
Scl	hedule D: Creditors	Who Have Claims Secure	d by Propert	V	12/15
		If two married people are filing together, both are e out, number the entries, and attach it to this form. O			
numb	er (if known).				
1. Do	any creditors have claims secured by	y your property?			
[	$\square$ No. Check this box and submit t	his form to the court with your other schedules. Y	ou have nothing else t	to report on this form.	
1	Yes. Fill in all of the information	helow			
		bolow.			
Part	-		Column A	Column B	Column C
		more than one secured claim, list the creditor separatels a particular claim, list the other creditors in Part 2. As	y Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
	·	•	value of collateral.	claim	If any
2.1	Prestige Financial	Describe the property that secures the claim:	\$13,186.20	\$8,000.00	\$5,186.20
	Service Creditor's Name		Ψ10,100.20	Ψο,οσοίσο	Ψ0,100.20
	Cibalisi s rialing	2014 Cheverolet Cruze 116,792 miles			
		Stollen 1-2019			
	PO Box 27166	As of the date you file, the claim is: Check all that			
	Salt Lake City, UT 84127	apply.			
		☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
`		_			
_	ebtor 1 only		ecurea		
_	ebtor 2 only				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a community debt	Other (including a right to offset)	Money Security		
	community debt				
Date	debt was incurred 2-17	Last 4 digits of account number 1072			
	St. Louis City Collector				
2.2	of Revenue	Describe the property that secures the claim:	\$988.00	\$25,000.00	\$0.00
	Creditor's Name	5718 Henner Saint Louis, MO 63120			
		Saint Louis City County			
		As of the date you file, the claim is: Check all that			
	1200 Market Street	apply.			
	St. Louis, MO 63103	☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
<b>■</b> D	ebtor 1 only	An agreement you made (such as mortgage or se	ecured		
□D	ebtor 2 only	car loan)			
□ D	ebtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
<b>□</b> A	t least one of the debtors and another	☐ Judgment lien from a lawsuit			

community debt

 $\hfill\square$  Check if this claim relates to a

☐ Other (including a right to offset)

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De	ebtor 1 Joyce L M	lennies		Case number (if known)		
	First Name	Middle Name	Last Name			
Da	te debt was incurred	2013 La	ast 4 digits of account number			
Δ	Add the dollar value o	f your entries in Column A o	n this page. Write that number here:	\$14,174.2	20	
	f this is the last page Vrite that number her	of your form, add the dollar	value totals from all pages.	\$14,174.2	20	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Ca	ISE 19-41430 DUC	, 1 Fileu 03/12	Pa 20 of 58	03/12/19 10	15.55 Mail i	Jocument
Fill in this in	formation to identify your o	case:	Pg 20-01-58			
Debtor 1	Joyce L Mennies					
DODIOI 1	First Name	Middle Name	Last Name		—	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF MISSOURI			
Case number	•					
(if known)						Check if this is an
					a	mended filing
Official Fo	orm 106E/F					
	E/F: Creditors W	ho Have Unsec	ured Claims			12/15
	and accurate as possible. Us			Part 2 for craditors w	ith NONDDIODITY clai	
Schedule D: Cr left. Attach the name and case	cecutory Contracts and Unexp editors Who Have Claims Sec Continuation Page to this pag number (if known).	ured by Property. If more see. If you have no informat	space is needed, copy	the Part you need, fil	I it out, number the en	tries in the boxes on the
	st All of Your PRIORITY Un					
_ `	editors have priority unsecure	a ciaims against you?				
■ No. Go	to Part 2.					
☐ Yes.	st All of Your NONPRIORIT	V Uneacured Claims				
_ `	editors have nonpriority unsec					
□ No. Yo	u have nothing to report in this pa	art. Submit this form to the o	court with your other sche	edules.		
Yes.						
unsecured	your nonpriority unsecured cla claim, list the creditor separately reditor holds a particular claim, li	for each claim. For each cl	aim listed, identify what t	type of claim it is. Do n	ot list claims already inc	cluded in Part 1. If more
						Total claim
4.1 <b>Abb</b>	ott Service	Last 4 digi	its of account number	9600		\$879.77
P.O.	iority Creditor's Name Box 847199	When was	the debt incurred?			
	as, TX 75284 er Street City State Zip Code	As of the	late you file, the claim	is: Chock all that apply	,	
	incurred the debt? Check one.	AS OF THE C	late you me, the claim	3. Check all that apply	y	
■ De	ebtor 1 only	☐ Conting	ient			
	ebtor 2 only	☐ Unliquid				
	ebtor 1 and Debtor 2 only	☐ Dispute				
_	least one of the debtors and and	_ `	ONPRIORITY unsecured	d claim:		
= : ::	neck if this claim is for a comm	Па	loans			
debt	claim subject to offset?	☐ Obligati	ions arising out of a sepa	ration agreement or d	ivorce that you did not	
■ No	)	☐ Debts to	o pension or profit-sharin	g plans, and other sim	nilar debts	
☐ Ye	es .	Other.	Specify medical bil	I		

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Deptor	1 Joyce L Mennies	Case number (if known)	
4.2	Account Control Systems	Last 4 digits of account number 7997	\$185.53
	Nonpriority Creditor's Name 85 Chestnut Ridge Montvale, NJ 07645	When was the debt incurred? 2016	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Service	
4.3	Advance America	Last 4 digits of account number	\$238.00
	Nonpriority Creditor's Name 10519 St. Charles Rock Road St. Louis, MO 63074	When was the debt incurred? 2014	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify payday loan	
4.4	American General	Last 4 digits of account number 0142	\$267.00
	Nonpriority Creditor's Name 600 Royal Ace Evansville, IN 47715	When was the debt incurred? 2009	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify credit card	

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Debtor	1 Joyce L Mennies	Case number (if known)	
4.5	Americash Loans LLC	Last 4 digits of account number	\$848.58
	Nonpriority Creditor's Name 880 Lee St., Ste .302 Des Plaines, IL 60016	When was the debt incurred? 2014	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify payday loan	
4.6	Anthem	Last 4 digits of account number 3567	\$112.25
	Nonpriority Creditor's Name C/O Rawlings Financial PO Box 2020	When was the debt incurred? 2016	
	La Grange, KY 40031		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify <b>Service</b>	
4.7	Ballas Anesthesia	Last 4 digits of account number 2318	\$56.00
	Nonpriority Creditor's Name C/O National Healthcare 700 Spirit Of St. Louis Blvd	When was the debt incurred? 8-12	
	St. Louis, MO 63005  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify medical bill	

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Case number (if known)

BJC Healthcare	Last 4 digits of account number 7681	\$121.20
Nonpriority Creditor's Name PO Box 958410 Saint Louis, MO 63195	When was the debt incurred? 2016	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
BJC Healthcare	Last 4 digits of account number 8078	\$200.00
Nonpriority Creditor's Name PO Box 958410	When was the debt incurred? 2013	
Saint Louis, MO 63195		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify	
☐ res	Other. Specify Interior 5111	
Charter	Last 4 digits of account number 5580	\$123.41
Nonpriority Creditor's Name P.O. Box 790086	When was the debt incurred? 2013	
St. Louis, MO 63179  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify service	

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Main Document Case 19-41436 Pg 24 of 58 Case number (if known) Debtor 1 Joyce L Mennies 4.1 Citi 2518 \$759.00 Last 4 digits of account number Nonpriority Creditor's Name C/O Portfolio Recovery When was the debt incurred? 2-14 120 Corporate Blvd Norfolk, VA 23502 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify credit card ☐ Yes 4.1 **Florissant Medical** 3892 \$3,191.25 Last 4 digits of account number 2 Nonpriority Creditor's Name 4579 Laclede Ave When was the debt incurred? 2-14 Saint Louis, MO 63108 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical bill 4.1 Fox Finance \$410.00 Last 4 digits of account number Nonpriority Creditor's Name 442 N. 4th Street When was the debt incurred? 2014 St. Louis, MO 63102 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No ☐ Yes

■ Other. Specify payday loan

☐ Student loans

report as priority claims

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

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or 1 Joyce L Mennies	Pg 25 of 58 Case number (if known)	
GE Money	Last 4 digits of account number 4655	\$2,008.00
Nonpriority Creditor's Name C/O Jacob Marsh 5500 Main Street, Suite 101 Buffalo, NY 14221	When was the debt incurred? 2011	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims	did not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify credit card	
Goodyear Tire	Last 4 digits of account number 2518	\$1,541.00
Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117	When was the debt incurred? 3-14	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims	lid not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify credit card	
HFC	Last 4 digits of account number 3440	Unknown
Nonpriority Creditor's Name PO Box 3425	When was the debt incurred?	
Buffalo, NY 14240  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you or report as priority claims	did not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify service

C	Case 19-41436 Doc 1	Filed 03/12/19	ment
Debtor 1	Joyce L Mennies	Pg 26 of 58 Case number (if known)	
	•		
4.1 7 Int	ternal Revenue Service	Last 4 digits of account number	\$0.00
Noi PC	npriority Creditor's Name D Box 7346 niladelphia, PA 19101	When was the debt incurred?	
	mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Wh	o incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
del		$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice Only	
4.1 <b>Ki</b> ı	ng Of Kash	Last 4 digits of account number	\$900.00
Noi	npriority Creditor's Name		
	14 West Florissant	When was the debt incurred? 2014	
	nnings, MO 63136 mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	o incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
_	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
del		☐ Obligations arising out of a separation agreement or divorce that you did not	
ls t	he claim subject to offset?	report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify payday loan	
4.1 <b>Mi</b>	dwest Radiological	Last 4 digits of account number 2581	\$260.00
J	npriority Creditor's Name	Last 4 digits of account number	Ψ200.00
PC St.	D Box 38900 . Louis, MO 63138	When was the debt incurred? 2016	
	mber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
_	o incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

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debt

■ No

☐ Yes

■ Other. Specify medical bill

☐ Student loans

 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

 $\hfill \Box$  Check if this claim is for a community

Is the claim subject to offset?

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1 Joyce L Mennies		Case number (if known)				
Missouri Department of Revenue	Last 4 digits of account number		\$0.0			
Nonpriority Creditor's Name	_					
DO Dov. 475	When was the debt incurred?					
PO Box 475 Jefferson City, MO 65105						
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
$\square$ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Notice Only	<u>/</u>				
Missouri Pay Day Loan	Last 4 digits of account number	4787	\$590.0			
Nonpriority Creditor's Name	Last 4 digits of account number		ψ550.0			
11732 W. Florissant Florissant, MO 63033	When was the debt incurred?	11-14				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	Other. Specify payday loa	<u>n</u>				
MW Vasculargeneral Surgery	Last 4 digits of account number	4796	\$27.0			
Nonpriority Creditor's Name	_					
C/O Kansas Counselors PO Box 14765	When was the debt incurred?	1-14				
Lenexa, KS 66285  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.	in and you may the olumn	250 dii. didi. depriy				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another						
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				

☐ Yes

■ Other. Specify \_medical bill

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Joyce L Mennies	Case number (if known)	
Pro Rehab	Last 4 digits of account number 4919	\$405.00
Nonpriority Creditor's Name C/O Consumer Adjustment 12855 Tesson Ferry	When was the debt incurred? 11-09	
St. Louis, MO 63121  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
Safeco	Last 4 digits of account number 6897	\$120.00
Nonpriority Creditor's Name C/O Caine Weiner PO Box 5010	When was the debt incurred? 9-14	
Woodland Hills, CA 91365  Number Street City State Zip Code	As of the date were file the plates in O	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Continuent	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	•	
_	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify service	
St. Louis Children's Hospital	Last 4 digits of account number 7939	\$10,759.33
Nonpriority Creditor's Name P.O. Box 956190	When was the debt incurred? 2016	
St. Louis, MO 63195  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that y report as priority claims	ou did not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify medical bill	

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	<del></del>		
St. Louis Children's Hospital	Last 4 digits of account number	8400	\$50
Nonpriority Creditor's Name P.O. Box 956190	When was the debt incurred?	2016	
St. Louis, MO 63195  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify medical bil	<u> </u>	
Syncb	Last 4 digits of account number	6524	\$98
Nonpriority Creditor's Name			ΨΟ
P.O. Box 965036	When was the debt incurred?	2006	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim	ic: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	<b>15.</b> Спеск ан тат арргу	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	•	
Yes	Other. Specify credit card		
T-Mobile	Last 4 digits of account number	7969	\$73
Nonpriority Creditor's Name	- When we the debt in surred 0	42.44	
Amsher Collection Services 600 Beacon Pkwy W, Suite 300 Birmingham, AL 35209-3114	When was the debt incurred?	12-14	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	

■ No ☐ Yes

■ Other. Specify service

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Filed 03/12/19 Entered 03/12/19 16:15:33 Case 19-41436 Doc 1 Main Document Pg 30 of 58 Case number (if known) Debtor 1 Joyce L Mennies 4.2 \$0.00 United States Attorney Last 4 digits of account number 9 Nonpriority Creditor's Name 111 South 10th Street When was the debt incurred? 20th Floor Saint Louis, MO 63102 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.3 \$1,728.00 Washington University 4432 Last 4 digits of account number 0 Nonpriority Creditor's Name C/O CACI When was the debt incurred? 2015 P.O. Box 270480 St. Louis, MO 63127 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical bills ☐ Yes 4.3 Washington University 4311 \$1,124.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 502432 When was the debt incurred? 12-15 St. Louis, MO 63150-2432 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

### Part 3: List Others to Be Notified About a Debt That You Already Listed

■ Other. Specify medical bill

Type of NONPRIORITY unsecured claim:

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor 2 only

debt

■ No

☐ Yes

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

■ Unliquidated

☐ Student loans

report as priority claims

☐ Disputed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Joyce L Mennies

Case number (if known)

Name and Address Wakefield And Assoc. PO Box 58 Fort Morgan, CO 80701 On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Line 4.31 of (Check one):

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	29,079.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	29,079.32

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Fill in this infor	mation to identify your	case:		
Debtor 1	Joyce L Mennies			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MISSOURI	
Case number (if known)				☐ Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.4	<u> </u>				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

# Case 19-41436 Doc 1 Filed 03/12/19 Entered 03/12/19 16:15:33 Main Document

			Pa 33 of 58		
Fill in this in	nformation to identify your	case:			
Debtor 1	Joyce L Mennies				
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	EASTERN DISTRICT C	F MISSOURI		
Cooo numbo	\r				
Case number (if known)	<del></del>				☐ Check if this is an
					amended filing
					-
Official	Form 106H				
Schedi	ule H: Your Cod	ehtors			12/15
Jonean	<u> </u>				12/13
■ No □ Yes 2. Withi	ou have any codebtors? (If you have any codebtors? (If you have any codebtors?)  n the last 8 years, have you, California, Idaho, Louisiana,	ı lived in a community pı	roperty state or territor	r <b>y?</b> (Community property	√ states and territories include
■ No. G	Go to line 3.  Did your spouse, former spou			inglon, and visconsii.)	
in line 2 Form 10 out Col	2 again as a codebtor only i 06D), Schedule E/F (Official umn 2. olumn 1: Your codebtor	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the DGG). Use Schedule D, Schedul	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
Na	me, Number, Street, City, State and Zl	P Code		Check all schedule	es that apply:
3.1				☐ Schedule D. line	٩
	ame			□ Schedule E/F, li	
				☐ Schedule G, line	
_					<u> </u>
	umber Street	01-1-	710.0 - 4-		
Ci	ty	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			Schedule E/F, li	
				Schedule E/F, II	
				□ Schedule G, line	<del></del>
	umber Street			_	
Ci	ty	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
Del	otor 1 Joyce L Mer	nnies			_				
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF MISSOURI		_				
	se number 		-		[	heck if this is:  An amende  A supplement	d filing ent showing		
$\bigcirc$	fficial Form 106I							lowing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as posi- plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  1: Describe Employment	are married and not fili	ng jointly, and your s ith you, do not includ	pouse i de infori	s living v nation ab	vith you, included in the sout your spo	ude informa ouse. If mor	ation about re space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more than one job, attach a separate page with information about additional	_	☐ Employed			☐ Employed			
		Employment status	■ Not employed			☐ Not employed			
	employers.	Occupation	Retired			_			
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
<b>Esti</b> spou	mate monthly income as of the duse unless you are separated.	ate you file this form.  f	you have nothing to re	port for	any line, v	write \$0 in the	space. Incl	ude your no	n-filing
If yo	u or your non-filing spouse have me e space, attach a separate sheet to	ore than one employer, co	ombine the information	for all e	employers	for that perso	n on the line	es below. If	you need
					For	Debtor 1	For Debt non-filin	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Joyce L Mennies		(	Case	number (if known)				
					For	Debtor 1		Debtor		
	Cop	y line 4 here	4.		\$	0.00	\$		N/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	а.	\$	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		N/A	=
	5e.	Insurance	56	Э.	\$	0.00	\$		N/A	-
	5f.	Domestic support obligations	5f		\$	0.00	\$		N/A	-
	5g.	Union dues	50	-	\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	า.+	\$_	0.00	+ \$_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0.00	\$		N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	88		\$	0.00	\$_		N/A	_
	8b.	Interest and dividends	8b	ο.	\$_	0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	Э.	\$	0.00	\$_		N/A	_
	8d.	Unemployment compensation	80	d.	\$	0.00	\$		N/A	-
	8e.	Social Security	86	€.	\$	1,722.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	0.00	\$_		N/A	_
	8g. 8h.	Pension or retirement income	98	ე. 1.+	\$_ \$	255.00	+ \$_		N/A N/A	_
	OII.	Other monthly income. Specify:	_ 01	1.+	Φ_	0.00	+ <sub>P</sub> _		IN/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		<u> </u>	1,977.00	\$_		N/A	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		1,977.00 + \$		N/A	= \$	1,977.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,377.00		IVA		1,377.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your fir friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep		,	•	•		∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	1,977.00
13.	Do :	you expect an increase or decrease within the year after you file this form? No.	?						Combine month!	ned y income
	_	Voc Evoloin:								

Official Form 106I Schedule I: Your Income page 2

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Fill i	n this informa	tion to identify yo	our case:					
Debtor 1 Joyce L Mennies							k if this is: An amended filing	
Debt (Spo	or 2 use, if filing)				_		A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unite	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MISSO	URI	-	MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J						
Sc	hedule	J: Your	Exper	ises				12/15
Be a	as complete a	and accurate as	possible.	If two married people ar ch another sheet to this				
Part		ibe Your House	hold					
1.	Is this a join No. Go to							
			in a separa	ate household?				
	□ No □ Ye	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents i	names.						☐ Yes ☐ No
								□ Yes
								□ No
					-			☐ Yes
								□ No □ Yes
3.	Do your exp	enses include	_	No				□ res
		f people other to d your depende	han $_{m \Box}$	Yes				
Esti exp	mate your ex	ate Your Ongoi penses as of you a date after the I	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed the second	orm as a su J, check th	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	•	n assistance an		government assistance i luded it on <i>Schedule I:</i> )	•		Your expe	enses
,·		•						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4. \$		0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		75.00
5		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

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Debtor 1	Joyce L Mennies	Case num	per (if known)	
S. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	300.00
6b.	Water, sewer, garbage collection	6b.	\$	70.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify:	6d.	\$	0.00
	and housekeeping supplies	7.	\$	450.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	100.00
	onal care products and services	10.	\$	70.00
	cal and dental expenses	11.	\$	100.00
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	100.00
	of tinclude car payments.	12.	\$	300.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	table contributions and religious donations	14.	\$	0.00
. Insur	•	1-1.	Ψ	0.00
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	0.00
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Speci	, , ,	16.	\$	0.00
	llment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	176.	\$	
	· · · · · · · · · · · · · · · · · · ·		·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report a cted from your pay on line 5, Schedule I, Your Income (Official Form 106)		\$	0.00
	r payments you make to support others who do not live with you.	).	\$	0.00
Speci		19.	<u> </u>	0.00
	r real property expenses not included in lines 4 or 5 of this form or on Sc		ur Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20b. 20c.	· -	
	•		·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	*	0.00
. Other	Cell Phone	21.	+\$	58.00
Calcu	ılate your monthly expenses			
	Add lines 4 through 21.		\$	1,723.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	)	\$	1,723.00
		_	·	4 = 22 22
22c. <i>F</i>	Add line 22a and 22b. The result is your monthly expenses.		\$	1,723.00
. Calcu	ılate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,977.00
	Copy your monthly expenses from line 22c above.	23b.		1,723.00
200.	opp jour monthly expended from the 220 above.	200.	*	1,7 23.00
23c.	Subtract your monthly expenses from your monthly income.			
200.	The result is your <i>monthly net income</i> .	23c.	\$	254.00
	ou expect an increase or decrease in your expenses within the year after			
	ample, do you expect to finish paying for your car loan within the year or do you expect you	our mortgage p	payment to increase	e or decrease because o
	cation to the terms of your mortgage?			
■ No	).			
☐ Ye	es. Explain here:			

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Fill in the	his information to identif	y your case:			
Debtor	, ···-	nnies			
Dalatan	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if		Middle Name	Last Name		
I Inited (	Statoo Bankruntay Court fo	or the: EASTERN DISTRIC	T OF MISSOURI		
United	States Bankruptcy Court fo	Title. LASTERN DISTRIC	T OF WIISSOURI		
Case nu	umber				
(if known)					Check if this is an
					amended filing
Officia	al Form 106Dec				
		ut an Individua	al Dehtor's So	chadulas	12/15
DCC		at all illaiviau		Jiicaaics	12/15
If two m	arried people are filing to	ogether, both are equally res	sponsible for supplying co	rrect information.	
					<u>.</u>
					ement, concealing property, or 00, or imprisonment for up to 20
	r both. 18 U.S.C. §§ 152,		anki upicy case can result	π πιοσ αρ το ψ200,00	oo, or imprisonment for up to 20
	<b>.</b>				
	Sign Below				
D:	d			h ambourtary famous 2	
Die	u you pay or agree to pay	y someone who is NOT an at	ttorney to neip you fill out	bankruptcy forms?	
	No				
	Yes. Name of person			Attach Pan	nkruptcy Petition Preparer's Notice,
Ц	res. Name of person				n, and Signature (Official Form 119)
Una	der nenalty of neriury I d	eclare that I have read the s	ummary and schedules fil	ad with this declarati	on and
	t they are true and correc		diffilary and schedules in	ca with this acciarati	on and
v	/a/ lawas I Mannias		V		
	/s/ Joyce L Mennies Joyce L Mennies		X Signature o	f Dehtor 2	
	Signature of Debtor 1		Oignature o	35.01 _	
	<b>.</b>		<b>.</b> .		
	Date March 11, 2019	<u> </u>	Date		

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Fil	l in this inform	nation to identify you	r case:			
De	btor 1	Joyce L Mennies	S			
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MISSOURI		
Ca	sa numhar					
					-	
						Ç
O	fficial Fo	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcv	4/16
						nlying correct
info	ormation. If m	ore space is needed,	attach a separate sheet to			
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI  Case number ((Miscouni))  Committed States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI  Case number ((Miscouni))  Committed States Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community properties and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  4. Did you have any income from employment or from operating a businessed, including part-time activities. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.						
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	_	, , ,				
	_	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:		Debtor 2 Prior Ad	dress:	
			lived there			livea there
	What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Debtor 2 Prior Address: Dates Debtor 2 lived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property tes and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)					
ota	_	00 morado / m20ma, 0a	morria, idario, Lodiolaria, ito	vada, rrow moxico, r dono re	oo, roxao, rraomington and re	noconomi,
	_	les soms over Clineral Cod		(('a'al Farra 400LI)		
	⊔ Yes. Ma	ike sure you fill out S <i>ci</i>	nedule H: Your Codebtors (O	TICIAI FORM 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	u received from all jobs and a	all businesses, including part-	time activities.	ndar years?
	_	3 <b>,</b> ,		,		
	□ No Fill	in the details.				
	Tes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Joyce L Mennies Pg 40 of 58 Case number (if known)

				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last caler nuary 1 to	ndar year: December		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions bonuses, tips	,
				☐ Operating a business		☐ Operating a business	
For (Ja	the calen nuary 1 to	dar year be December	31 2017 \	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions bonuses, tips	,
				☐ Operating a business		☐ Operating a business	
5.	Include in and other winnings.  List each	come regard public benef If you are fili	less of whethe it payments; p ng a joint case he gross incon	r that income is taxable. Exe ensions; rental income; inter and you have income that y	o previous calendar years? amples of other income are a rest; dividends; money collec you received together, list it o tely. Do not include income the	ted from lawsuits; royalties; only once under Debtor 1.	al Security, unemployment and gambling and lottery
				D-1:1-:-4		D-1-10	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
		y 1 of curre filed for bar		Retirement Income	\$765.00		
				Social Security Benefits	\$5,166.00		
Par	+ 3· Lie	t Cartain Da	vments Vou N	lade Before You Filed for	Rankruntov		
			-				
6.	□ No.	Neither De	ebtor 1 nor De	debts primarily consumed btor 2 has primarily consu- personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. §	101(8) as "incurred by an
			90 days before	e you filed for bankruptcy, di	d you pay any creditor a total	I of \$6,425* or more?	
		□ No.	Go to line 7.				
		Yes	paid that cred not include p	ditor. Do not include paymer ayments to an attorney for the		ations, such as child suppo	ort and alimony. Also, do
		* Subject	paid that cred not include p to adjustment d	ditor. Do not include paymer ayments to an attorney for the on 4/01/19 and every 3 year	nts for domestic support oblig his bankruptcy case. s after that for cases filed on	ations, such as child suppo	ort and alimony. Also, do
	■ Yes.	* Subject  Debtor 1 c	paid that cred not include p to adjustment of or Debtor 2 or	ditor. Do not include paymer ayments to an attorney for the analyst and every 3 year both have primarily consu	nts for domestic support oblig his bankruptcy case. s after that for cases filed on	ations, such as child supportions after the date of adjustm	ort and alimony. Also, do
	■ Yes.	* Subject  Debtor 1 c  During the	paid that cred not include p to adjustment of or Debtor 2 or	ditor. Do not include paymer ayments to an attorney for the analyst and every 3 year both have primarily consu	nts for domestic support oblig his bankruptcy case. s after that for cases filed on umer debts.	ations, such as child supportions after the date of adjustm	ort and alimony. Also, do
	■ Yes.	* Subject  Debtor 1 c  During the	paid that crec not include p to adjustment of pr Debtor 2 or 90 days before Go to line 7. List below ea include paym	ditor. Do not include paymer ayments to an attorney for the condition 4/01/19 and every 3 year both have primarily consumpted you filed for bankruptcy, discharged to whom you paints.	nts for domestic support oblig his bankruptcy case. s after that for cases filed on umer debts.	ations, such as child support or after the date of adjustm I of \$600 or more? I the total amount you paid	ort and alimony. Also, do ent.

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Debtor 1 Joyce L Mennies Pg 41 of 58 Case number (if known)

7.	Within 1 year before you filed for bankruptous Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No	rtners; relatives of any gen control, or owner of 20% of	eral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos  No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title					t or custody
	Case number	Nature of the case	Court or agency		Status of th	ic case
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address			oreclosed, garnis	shed, attached	d, seized, or levied?  Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No  Yes. Fill in the details.		luding a bank or fir	nancial institutior	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess	taker		efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					_
13.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Debtor 1 Joyce L Mennies Pg 42 of 58 Case number (if known)

14.	Within 2 years before you filed for banks  ■ No  □ Yes. Fill in the details for each gift or		did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that a more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Part	List Certain Losses				
	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	□ No				
	Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	the any insurance coverage for the loss amount that insurance has paid. List pending	Date of your loss	Value of property lost
	2014 Chevrolet Cruze Stollen	insurar	nce claims on line 33 of Schedule A/B: Property.	1-2019	\$8,000.00
	<ul> <li>No</li> <li>Yes. Fill in the details.</li> <li>Person Who Was Paid Address</li> <li>Email or website address</li> <li>Person Who Made the Payment, if Not Yes</li> </ul>	<b>You</b>	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Robert E. Faerber 230 S. Bemiston, Suite 600 Clayton, MO 63105			2-6-17	\$650.00
	Robert E. Faerber 230 S. Bemiston, Suite 600 Clayton, MO 63105			3-4-19	\$200.00
	promised to help you deal with your cre Do not include any payment or transfer tha	ditors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
				.11440	

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Debtor 1 Joyce L Mennies

18.	transferred Include both	ars before you filed for bankrup in the ordinary course of your n outright transfers and transfers r and transfers that you have alrea	business or nade as sec	financial af urity (such as	fairs? s the granting of a			-	
	☐ Yes. F	ill in the details.							
	Person Wi Address	no Received Transfer		cription and erty transfe		paym	ibe any property or ents received or debts n exchange	Date to	ransfer was
	Person's r	elationship to you							
19.	beneficiary	ears before you filed for bankru? (These are often called asset-p			any property to a	self-settle	d trust or similar device	of which	n you are a
	■ No □ Yes F	ill in the details.							
	Name of tr		Des	cription and	value of the pro	perty trans	sferred		ransfer was
								made	
Par	t 8: List o	of Certain Financial Accounts, I	nstruments	Safe Depos	sit Boxes, and S	orage Unit	s		
20.	Within 1 ye	ar before you filed for bankrup	tcy, were an	y financial a	ccounts or instr	uments he	eld in your name, or for y	our bene	efit, closed,
	Include che	d, or transferred? ecking, savings, money market, nsion funds, cooperatives, ass					t; shares in banks, credi	t unions	, brokerage
	_	ill in the details.							
	Name of F	inancial Institution and lumber, Street, City, State and ZIP	Last 4 di	•	Type of acco	unt or	Date account was closed, sold, moved, or		Last balance re closing or transfer
							transferred		
21.		v have, or did you have within ther valuables?	l year befor	e you filed fo	or bankruptcy, a	ny safe de <sub>l</sub>	posit box or other depos	itory for	securities,
	■ No								
	☐ Yes. F	ill in the details.							
		inancial Institution lumber, Street, City, State and ZIP Code)	Add	else had ac ress (Number, and ZIP Code)		Describe	the contents		you still e it?
22.	Have you s	tored property in a storage uni	t or place ot	her than you	ur home within 1	year before	re you filed for bankrupt	cy?	
	■ No								
	☐ Yes. F	ill in the details.							
		torage Facility lumber, Street, City, State and ZIP Code)	to it		had access Street, City,	Describe	the contents		you still e it?
D		'6 - Barraneta Vara Haldan Oranta		<b>F</b> l					
Par	t 9: Ident	ify Property You Hold or Contro	or some	one Eise					
23.	Do you hole for someon	d or control any property that s ne.	omeone els	e owns? Inc	clude any proper	ty you bor	rowed from, are storing	for, or ho	old in trust
	■ No □ Yes. F	Fill in the details.							
	Owner's N Address (N	ame lumber, Street, City, State and ZIP Code)		re is the pro ber, Street, City		Describe	the property		Value
Par	t 10: Give	Details About Environmental In	formation						

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Joyce L Mennies

Case number (if known)

	regi	liations controlling the cleanup of these	e sub	stances, wastes, or material.			
		means any location, facility, or propert wn, operate, or utilize it, including disp	-	•	aw,	whether you now own, operate,	or utilize it or used
		<i>ardous material</i> means anything an env ardous material, pollutant, contaminant			wa	ste, hazardous substance, toxic s	substance,
Rep	ort a	II notices, releases, and proceedings th	at yo	u know about, regardless of when	the	ey occurred.	
24.	Has	any governmental unit notified you that	ıt you	may be liable or potentially liable	unc	der or in violation of an environme	ental law?
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any	release of hazardous material?			
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and		Environmental law, if you know it	Date of notice
				ZIP Code)			
26.	Hav	e you been a party in any judicial or adı	minis	trative proceeding under any envir	oni	mental law? Include settlements	and orders.
		No					
		Yes. Fill in the details.					
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Conr	nections to Any Business			
27	۱۸/:41	<ul> <li>nin 4 years before you filed for bankrup</li> </ul>	tov d	id vau awn a business ar baye an		the following connections to an	, husingga
21.	VVIL	☐ A sole proprietor or self-employed	•	·			/ business :
		_				•	
		A member of a limited liability comp	oany	(LLC) or limited liability partnershi	р (г	.LP)	
		A partner in a partnership					
		☐ An officer, director, or managing ex					
		☐ An owner of at least 5% of the votin	ig or	equity securities of a corporation			
		No. None of the above applies. Go to	Part 1	2.			
		Yes. Check all that apply above and fil					
		siness Name dress	Des	scribe the nature of the business		Employer Identification numbe Do not include Social Security	
	(Nu	nber, Street, City, State and ZIP Code)	Nar	me of accountant or bookkeeper		Dates business existed	
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, d	id you give a financial statement to	o ar		ude all financial
		No					
		Yes. Fill in the details below.					
		me dress nber, Street, City, State and ZIP Code)	Dat	e Issued			

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor 1 Joyce L Mennies

Case number (if known)

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No
□ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforr	Fill in this information to identify your case:							
Debtor 1	Joyce L Mennies							
Debtor 2 (Spouse, if filing)								
United States E	Bankruptcy Court for the: Eastern District of Missouri							
Case number (if known)								

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
10 th	Il in the average monthly income that you received from a 11(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to couses own the same rental property, put the income from tha	-month period wo	ould be <b>I</b> e result.	March 1 through Do not include	gh August 31. e any income	If the amount m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commis	ssions	(before all	\$	0.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	de payments fro	om a sp	pouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househo and roommates. Do not include payments from a spo you listed on line 3.	<b>rt.</b> Include regu old, your depen	ular cor idents,	ntributions parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1						
	Gross receipts (before all deductions)	\$0.0						
	Ordinary and necessary operating expenses	-\$0.0						
	Net monthly income from a business, profession, or fa	arm \$0.0	00 Co	py here -> S	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$ 0.0						
	Ordinary and necessary operating expenses	-\$ 0.0		_	_			
	Net monthly income from rental or other real property	0.0	IU Co	opv here -> S	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1 Joyce L Mennies Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 255.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 255.00 255.00 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 255.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 255.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 255.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

3.060.00

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Debtor 1 Joyce L Mennies Case number (if known)

	16a. Fill	in the state in which you live.	MO		
	16h F:II	in the number of people in your bounded	1		
		in the number of people in your household.			47,125.00
	То	in the median family income for your state and siz find a list of applicable median income amounts, of tructions for this form. This list may also be availal	go online using the link specified in the	\$ separate	47,123.00
17	. How do	the lines compare?	. ,		
	17a.	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO			
	17b. l	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 about 14 about 14 about 15 about 16 about	tion of Your Disposable Income (Off		
Par	t 3:	Calculate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)		
18.	Сору ус	our total average monthly income from line 11		\$	255.00
19.	contend spouse's	the marital adjustment if it applies. If you are methat calculating the commitment period under 11 s income, copy the amount from line 13.	arried, your spouse is not filing with yo J.S.C. § 1325(b)(4) allows you to dedu	u, and you ct part of your	0.00
	19a. If th	ne marital adjustment does not apply, fill in 0 on lir	ne 19a.	<b>-</b> \$	0.00
	19b. <b>Su</b> l	btract line 19a from line 18.		\$	255.00
20.	Calcula	te your current monthly income for the year. F	ollow these steps:		
	20a. Co	py line 19b		\$	255.00
	Mu	litiply by 12 (the number of months in a year).		x	: 12
					<del></del>
	20b. The	e result is your current monthly income for the yea	r for this part of the form	\$	3,060.00
	20c. Co	py the median family income for your state and siz	te of household from line 16c	\$_	47,125.00
	21. <b>Ho</b>	w do the lines compare?			
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court, on the top of pag	ge 1 of this form, check box 3, 7	The commitment
		Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ss otherwise ordered by the court, on the	he top of page 1 of this form, ch	neck box 4, The
Par	t 4: S	Sign Below			
	By signi	ng here, under penalty of perjury I declare that the	information on this statement and in a	ny attachments is true and corr	ect.
)	( /s/ Jo	yce L Mennies			
-	Joyce	e L Mennies ure of Debtor 1	<del></del>		
	ŭ	larch 11, 2019			
	M	M/DD/YYYY			
	If you ch	necked 17a, do NOT fill out or file Form 122C-2.			

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Debtor 1 Joyce L Mennies Case number (if known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2018 to 02/28/2019.

Line 9 - Pension and retirement income

Source of Income: Pension

Constant income of \$255.00 per month.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-41436 Doc 1 Filed 03/12/19 Entered 03/12/19 16:15:33 Main Document Pg 54 of 58

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Eastern District of Missouri

In r	e Joyce L Mennies		Case No.	
	-	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSA	TION OF ATTOR	NEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I c compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	ne petition in bankruptcy, o	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,800.00
	Prior to the filing of this statement I have received		\$	850.00
	Balance Due		\$	3,950.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation	on with any other person u	nless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of			
5.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects	of the bankruptcy of	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering at</li> <li>b. Preparation and filing of any petition, schedules, statement</li> <li>c. Representation of the debtor at the meeting of creditors and</li> <li>d. Representation of the debtor in adversary proceedings and</li> <li>e. [Other provisions as needed]</li> </ul>	of affairs and plan which r confirmation hearing, and	nay be required; I any adjourned hea	
6.	By agreement with the debtor(s), the above-disclosed fee does	not include the following s	service:	
	CEI	RTIFICATION		
	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	ement or arrangement for p	payment to me for re	epresentation of the debtor(s) in
	March 11, 2019	/s/ Robert Faerber		
Date		Robert Faerber		
		Signature of Attorney Robert Faerber		
		230 S. Bemistion		
		Suite 600 Saint Louis, MO 63	3105	
		(314)727-3434 Fax	x: (314)727-6992	
		<u>faerber@msn.com</u> Name of law firm	<u> </u>	
1				

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### United States Bankruptcy Court Eastern District of Missouri

In re Joyce L Mennies		Case No.	
	Debtor(s)	Chapter	13
	VERIFICATION OF CREDITOR MAT	ΓRIX	
	(s) hereby certifies/certify under penalty o		
_	sses of my creditors (Matrix), consisting of	<b>3</b> page(s	) and is true, correct and
complete.			
	/s/ Joyce L Mennies		
	Joyce L Mennies		
	Debtor		
	D / 1 March 44 004	0	
	Dated: March 11, 201	9	

Abbott Service P.O. Box 847199 Dallas, TX 75284

Account Control Systems 85 Chestnut Ridge Montvale, NJ 07645

Advance America 10519 St. Charles Rock Road St. Louis, MO 63074

American General 600 Royal Ace Evansville, IN 47715

Americash Loans LLC 880 Lee St., Ste .302 Des Plaines, IL 60016

Anthem C/O Rawlings Financial PO Box 2020 La Grange, KY 40031

Ballas Anesthesia C/O National Healthcare 700 Spirit Of St. Louis Blvd St. Louis, MO 63005

BJC Healthcare PO Box 958410 Saint Louis, MO 63195

Charter P.O. Box 790086 St. Louis, MO 63179

Citi C/O Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502

Florissant Medical 4579 Laclede Ave Saint Louis, MO 63108

Fox Finance 442 N. 4th Street St. Louis, MO 63102

GE Money C/O Jacob Marsh 5500 Main Street, Suite 101 Buffalo, NY 14221 Goodyear Tire PO Box 6497 Sioux Falls, SD 57117

HFC PO Box 3425 Buffalo, NY 14240

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101

King Of Kash 6614 West Florissant Jennings, MO 63136

Midwest Radiological PO Box 38900 St. Louis, MO 63138

Missouri Department of Revenue PO Box 475 Jefferson City, MO 65105

Missouri Pay Day Loan 11732 W. Florissant Florissant, MO 63033

MW Vasculargeneral Surgery C/O Kansas Counselors PO Box 14765 Lenexa, KS 66285

Prestige Financial Service PO Box 27166 Salt Lake City, UT 84127

Pro Rehab C/O Consumer Adjustment 12855 Tesson Ferry St. Louis, MO 63121

Safeco C/O Caine Weiner PO Box 5010 Woodland Hills, CA 91365

St. Louis Children's Hospital P.O. Box 956190 St. Louis, MO 63195

St. Louis City Collector of Revenue 1200 Market Street St. Louis, MO 63103 Syncb P.O. Box 965036 Orlando, FL 32896

T-Mobile Amsher Collection Services 600 Beacon Pkwy W, Suite 300 Birmingham, AL 35209-3114

United States Attorney 111 South 10th Street 20th Floor Saint Louis, MO 63102

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